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CONFIRMATION NO. 2107

SERIAL NUMBER 10/687,386	FILING OR 371(c) DATE 10/15/2003 RULE	CLASS 607	GROUP ART UNIT 3766	ATTORNEY DOCKET NO. A03P1070
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APPLICANTS

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** CONTINUING DATA *****

None DM

** FOREIGN APPLICATIONS *****

None DM

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **

01/20/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	CA	8	26	3
Verified and Acknowledged	<i>John Moulder</i> Examiner's Signature	Initials			

ADDRESS

36802

TITLE

Implantable cardiac stimulation device including an output circuit that provides arbitrarily shaped defibrillation waveforms

FILING FEE RECEIVED 878	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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